PAGE 1 / 10 =

FEC FORM 1			GANIZ		- -					(Office (Jse Onl	v		-
1. NAME OF COMMITTEE (in	n full)		eck if name nanged)		ple:If typi	ng, type		12F	E4N				<u> </u>		
Claudia Te	·														
ADDRESS (number a	nd street)	PO Box 244													
(Check if a is changed															
J	,	Clinton	<u> </u>					STAT	 E ▲		3323	ZIF		 E▲	
COMMITTEE'S E-MA	AIL ADDRES	ss													
(Check if a is changed		compliand	ce@complia	inceconsi	ultingva.	com									
		Optional Sec	cond E-Mail A	ddress											. 1
COMMITTEE'S WEB (Check if a is changed	address		forcongress.cor	m 											
2. DATE 02	M / D 11	202	Y Y 22												
3. FEC IDENTIFIC	CATION NU	MBER ▶	C	C00632828		ï									
4. IS THIS STATEM	MENT	NEW (N)	OR	x	AMEN	IDED (A	.)								
I certify that I have e	examined thi	s Statement a	and to the bes	st of my kn	owledge	and belie	ef it is	true,	corre	ect an	d cor	nplete.			
Type or Print Name	of Treasurer	Hobbs, Cabe	ell, , ,												
Signature of Treasure	er <i>Hobbs</i> ,	Cabell, , ,		[I	Electronica	lly Filed]	[Date	М	10	/ D	07		2022	Y
NOTE: Submission of	false, errone		elete information			_	-				e pen	alties o	f 52 U.	S.C. §	30109
Office Use Only				F T	For further Federal Electronic Free 800 Focal 202-69	tion Comr 0-424-9530	nission	tact:					ORM 06/2012		

E	C Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the car information below.)	ndidate
	Name of Candidate Tenney, Claudia, , ,	
	Party Affiliation REP Sought: * House Senate President	State NY District 24
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.)) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	janization is a:
	Corporation Corporation w/o Capital Stock Labor Organi	zation
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fun committee. (i.e., nonconnected committee)	d or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo committees/organizations, at least one of which is an authorized committee of a federal candidate.	re political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo committees/organizations, none of which is an authorized committee of a federal candidate.	re political
	Committees Participating in Joint Fundraiser	
	1	

l	FEC Form 1 (Revised 0)	2/2009)		Page 3
٧	Irite or Type Committee Name	,		<u> </u>
	Claudia Tenney	for Congress		
6.		ganization, Affiliated Committee, Joint Fund	raising Representative, or Leade	rship PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD 20824	-0844
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Jo	int Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identification books and records.	fy by name, address (phone number optional)	and position of the person in posses	sion of committee
	Hobbs, Cab	ell, , ,		
	Full Name			
	Mailing Address	Po Box 244		
		Clinton	NY 13323	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼		- · · · -	
	Treasurer		elephone number	
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the tressistant treasurer).	easurer of the committee; and the r	name and address of
	Full Name Hobbs, Cab	ell, , ,		
	of Treasurer			
	Mailing Address	Po Box 244		
		Clinton	NY 13323	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer		elephone number	

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Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	Telephone number	
	r Depositories: List all banks or other depositories in which the committee deposits fundoxes or maintains funds.	ls, holds accounts, rents
Name of Bank,	Depository, etc.	
	EAGLEBANK	
Mailing Address	7815 WOODMONT AVE	
	BETHESDA MD	20814
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank,	Depository, etc.	
	Truist	
Mailing Address	1445 New York Avenue NY 4th Floor	
	Washington DC	20005
	CITY ▲ STATE ▲	ZIP CODE ▲

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5(a)	or(h). Joint Fundraisin	g Participant:		
(3)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	nising Representative	e, or Leadership PAC Sponsor
		IYNE VICTORY FUND		
	Mailing Address	PO BOX 341027		
		1		
		AUSTIN	TX	78734
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
			1 1 . 1	1
		CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	•		[_] [_] [
		lei	ephone Number	
9.	Panks or Other Denositor	viant List all hanks or other depositories in which t	ha committee deposit	s funds holds accounts ronts
Э.	safety deposit boxes or ma	ries: List all banks or other depositories in which t intains funds.	ne committee deposit	s lulius, floius accounts, ferits
	Name of Bank, Depository, etc.		1 1 1 1 1 1	
	Depository, etc.			
		2200 Wilson Blvd		
	Mailing Address	2200 Wilson Blvd Suite 100		
			VA	

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5(g) o	or(h). Joint Fundraisin	g Participant:			
	1		FEC	ID number	C
	2.		FEC	ID number	C
	3.		FEC	ID number	C
	4.		FEC	ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	Iraising R	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 341027			
		AUSTIN		TX	78734
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	nt Fundraisi	ng Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)	1 1 1		
	Mailing Address	1			
			1	1 . 1	1
	TITLE OF POSITION	_ CITY ▲		STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	I	Telephone	Number	
	safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds. Bridge Bank 1445-A Laughlin Avenue	n the comm	nittee deposit	s funds, holds accounts, rents
		CITY A		STATE ▲	ZIP CODE A

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundrais			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
lama of Any Connecto	d Organization, Affiliated Committee, Joint Fundra	oioina Donrocontativ	o ar Loodorobin DAC Snon
-	EY FOR CONGRESS VICTORY FUN	• .	e, or Leadership FAC Spon
Mailing Address	PO BOX 244		
	CLINTON	NY	13323
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	and Organization Affiliated Committee Joint Joint ify by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional) Line (phone number – optional) CITY ▲		
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit	ify by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of the content o	ify by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite the deposite boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional) CITY Te	STATE A	ZIP CODE A

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5(a)	or(h). Joint Fundraisin	g Participant:		
- (3)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
	4.			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA I	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		Fundraising Representa	
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE A
	TITLE OR POSITION	•	1	2 0052 -
		Te	elephone Number	
9.				
	safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	safety deposit boxes or ma	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposit	s funds, holds accounts, rents

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		FEC ID	number	C
				0
		FEC ID	number	С
		FEC ID	number	C
		FEC ID	number	С
=	liated Committee, Joint	Fundraising Rep	esentative	, or Leadership PAC Spon
EW YORK				
			1 1 1	
⊥ 1390 CHAIN BE	NIDGE RD STE 515			
MCLEAN			_ VA 	22101
	CITY A		STATE A	ZIP CODE ▲
ON V	CITY A	<u> </u>	TATE A	ZIP CODE A
ON ▼	CITY A	Telephone Nu		ZIP CODE A
	1390 CHAIN BE	1390 CHAIN BRIDGE RD STE 515 MCLEAN CITY A acted Organization Affiliated Committee	EW YORK 1390 CHAIN BRIDGE RD STE 515 MCLEAN CITY ▲	1390 CHAIN BRIDGE RD STE 515 MCLEAN CITY ▲ STATE ▲ Affiliated Committee Joint Fundraising Representa

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or(h). Joint Fundraisi n	g Participant:			
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
			FEC ID number	C
4.				
Name of Any Connected	Organization, Affiliated C	ommittee, Joint Fu	ndraising Representativ	ve, or Leadership PAC Sponsor
FRONTLINE NEV	V YORK			
Mailing Address	PO BOX 183			
	HUDSON		WI	54016
Relationship:	C	CITY A	STATE A	ZIP CODE ▲
Connected	d Organization Affiliated	d Committee	oint Fundraising Represen	tative Leadership PAC Sponsor
Full Name				
Mailing Address				
	1			I I-I
TITLE OR POSITION	▼ CI	TY 🛦	STATE ▲	ZIP CODE ▲
			Telephone Number	
safety deposit boxes or ma		r depositories in whi	ch the committee deposi	its funds, holds accounts, rents
Name of Bank, Depository, etc.				
Mailing Address				
	CI	TY 🛦	STATE ▲	ZIP CODE ▲